Application Number(s)

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I hereby state that I have re amended by any amendme	/ IIS 9 8 / 002 4and was viewed and understand the cont specifically referred to above isclose information which is m	ontents of the above identifie.	ied specificati		(if applicable). claims, as			
I hereby claim foreign prioriticate, or 365(a) of any	ty benefits under 35 U.S.C. 1 PCT international application we also identified below, by ch pplication having a filing date I	19(a)-(d) or 365(b) of any which designated at least	foreign applit one country	ication(s) for par other than the	entors centricate.			
Prior Foreign Application	Soundary	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed		copy Attached?			
Number(s)	Country	Immorrant.						

[Page 1 of 2]

Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto: I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below. Filing Date (MM/DD/YYYY)

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(July 1998)

Additional provisional application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

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- Utility or Design Patent Application

120 of any United States application(s), or 365(c) of any PCT international application designating the

United States of America, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT International application in the manner provided by the first paragraph of 35 U.S.C. 112, I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application.												
U.S. Parent Application or PCT Parent Number								iling Date		Parent Patent Number (If applicable)		
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Additional	U.S. or F	CT international a	pplication	numbers are £	sted on a	supple	ementa	I priority data	sheet P	TO/SB/	02B attached	nereto.
As a named inventor, I hereby appoint the following registered practitioner(s) to prosecute this application and to transact all business in the Pate and Trademark Office connected therewith: Customer Number								in the Patent				
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Scott B		•		38,370			THO	mas C.	FOI	LSOIII	33,3	1.4
Additional r	ecistered	d practitioner(s) na	ned on s	upplemental Re	gistered	Practiti	oner Ir	nformation she	et PTO	SB/020	attached her	eto.
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Name	Steven C. Petersen											
Address	Chrisman, Bynum & Johnson, P.C.											
Address _	19	00 Fifte	enth	Street								
City	Во	ulder				Sta	te	co	ZIP		0302	
Country	ÚS	S Telephone 303 546 1300 Fax 303-449-5										
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.												
Name of So	le or F	irst inventor:					petitio	n has been	filed fo	r this u	nsigned inve	entor
Gir	ven Nan	ne (first and mid	dle [if an	ıyD				Family	Name	or Sur	mame	
Robert	Robert C. Herrmann											
inventor's Signature			ler	man							Date	7/6/4
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Additional	Additional Inventors are being named on the _1_supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto						hed hereto					

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DECLARATION	ADDITIONAL INVENTOR(S) Supplemental Sheet Page 3 of 3					
Name of Additional Joint Inventor, if any:	A petition has been filed for this unsigned inventor					
Given Name (first and middle [if any])	Family Name or Surname					
Steven M.	Landin					

Inventor's Signature Golden Citizenship Residence: City US 1610 DECKEST 1408 Ulyesses No. Post Office Address Post Office Address Golden CO 80401 US City Country ZIP State A petition has been filed for this unsigned inventor Name of Additional Joint Inventor, if any: Given Name (first and middle [if any]) Family Name or Surname Inventor's Signature Date Citizenship Residence: City State Country Post Office Address Post Office Address City State ΖP Country Name of Additional Joint Inventor, if any: A petition has been filed for this unsigned inventor Given Name (first and middle [if any]) Family Name or Surname Inventor's Date Signature Citizenship Residence: City Post Office Address Post Office Address Country ZIP State

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